Effective on 12/09/2004							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known				
FEE TRANSMITTAL			ation Number	10/589,146			
For FY 2009			Date	3/15/2007			
FUI F I 2009			amed Inventor	Kaspar Haltiner			
✓ Applicant claims small entity status. See 37 CFR 1.27			Examiner Name William Ray Harp				
TOTAL AMOUNT OF PANNATUTE (C) 1177 00			Art Unit 2627				
TOTAL AMOUNT OF PAYMENT (\$) 1175.00			Attorney Docket 0115 - 062349				
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES EXAMINATIO Small Entity Small Entity Smal						-	
Application Type Fee (\$) Fee (\$		mall Entity Fee (\$)	Fee (\$)	mall Entity Fee (\$)	Fe	es Paid (\$)	
Utility 330 82	540	270	220	110		2 191	
Design 220 110	100	50	140	70			
Plant 220 110	330	165	170	85			
Reissue 330 165	540	270	650	325		WH	
Provisional 220 110	0	0	0	0		1000 minimum and the second	
2. EXCESS CLAIM FEES			· ·	Ū	***************************************	Small Entity	
T D					Fee (\$		
Each claim over 20 (including Reissues) 52 26						26	
Each independent claim over 3 (including I				220	110		
Multiple dependent claims					390	195	
<u>Total Claims</u> - 20 or HP <u>Extr</u>	a Claims Fe	<u>e (\$)</u> _	Fee Paid (\$)			e Dependent Claims	
HP = highest number of total claims paid for, if g	reater than 20.				Fee (S	S) Fee Paid (\$)	
· · · · · · · · · · · · · · · · · · ·		ee (\$)	Fee Paid (\$)		***************************************		
HP = highest number of independent claims paid	for, if greater than 3.						
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under							
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (S) Fee Paid (S)							
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Extension of Time fee. \$1175.00							
SUBMITTED BY							
Signature (Registration No. TAttorney/Agent) 22,132 Telephone 412-471-8815							
Name (Print/Type) William H. Logsdon Date July 16, 2009							